

My residence, post office address and citizenship are as stated below next to my name.

POLYMORPHS OF SUBEROYLANILIDE HYDROXAMIC ACID

☐ was filed on _____, as United States Non-Provisional Application U.S.S.N. _____, bearing Attorney Docket No. _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

☐ I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application designating at least one country other than the United States listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

[illegible]

☒ I hereby claim the benefit under Title 35, United States Code, § 119(e) or §120 of any United States application(s), or §365(c) of any PCT International application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

Application No. <i>(U.S.S.N.)</i>	Filing Date <i>(dd/mm/yy)</i>	Status <i>(Patented, Pending, Abandoned)</i>
10/379,149	04/03/03	Pending
60/361,759	04/03/02	Pending

PCT International Applications designating the United States:

PCT International Application No.	PCT Filing Date	Status

I hereby appoint the following attorneys and/or agents associated with Mintz, Levin, Cohn, Ferris, Glovsky & Popeo, P.C., Customer Number:



35437

PATENT TRADEMARK OFFICE

to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Please address all telephone calls to Ivor R. Elrifi at telephone number 212-935-3000.
Address all correspondence to:

Ivor R. Elrifi
Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.

Applicants: Thomas A. Miller, *et al.*
Attorney Docket: 24852-501 CIP

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or patent issued thereon.

Inventor's Signature:

Date

Full Name of Inventor: Thomas A. Miller
Citizenship: United States of America
Residence: 517 West 113th Street, #82
New York, New York 10025
Post Office Address: same as above

Inventor's Signature:

Date

Full Name of Inventor: Victoria M. Richon
Citizenship: United States of America
Residence: 184 Highland Road
Rye, New York 10580
Post Office Address: same as above